

Name
in
Full

Mary's Bratley

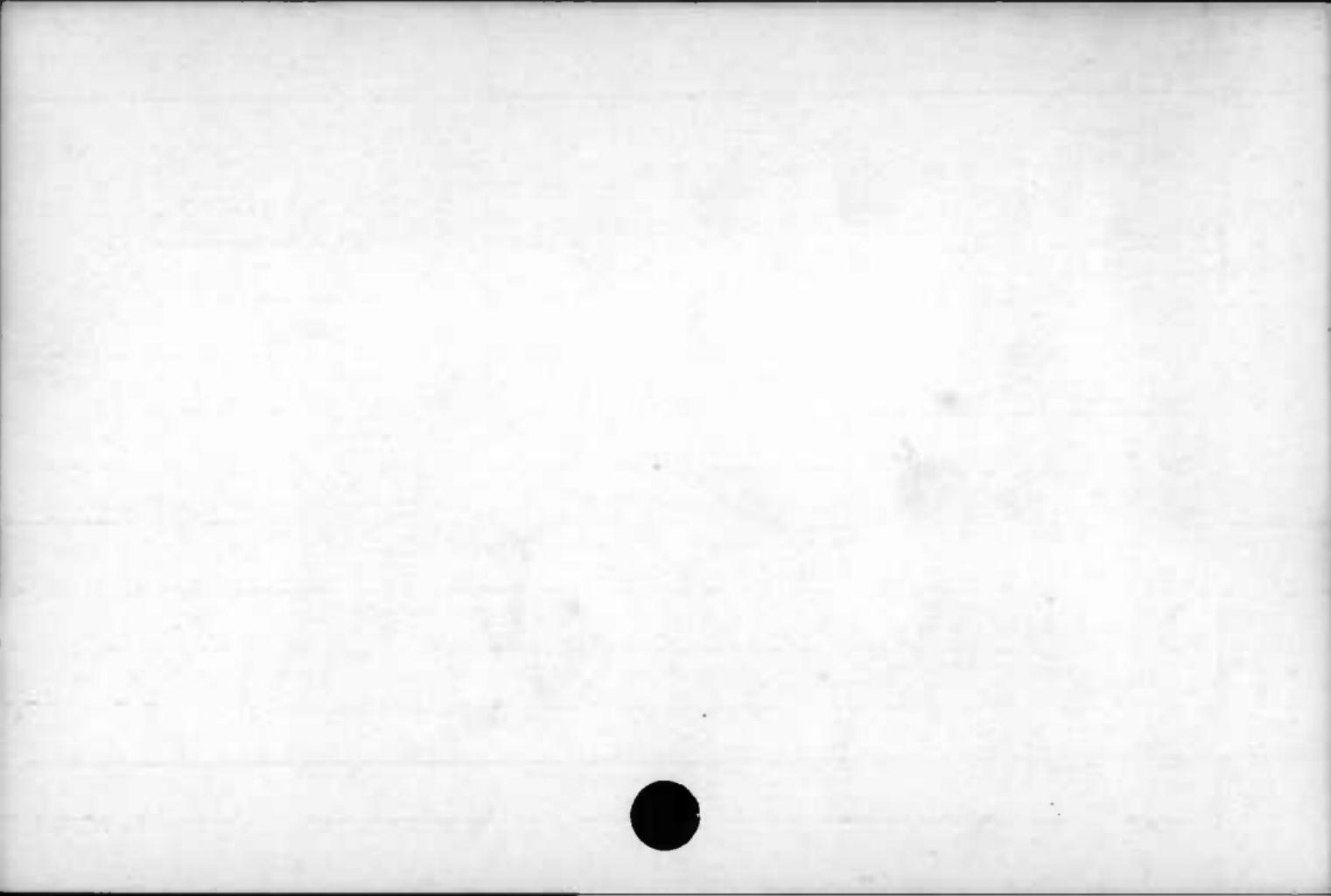
CERTIFICATE OF DEATH

TO BE ANSWERED BY
NEAREST FRIEND

Died at	Town	County	MARYLAND		
Date of death 1903	Month Dec	Day 19	Age 70	Months	Days
Sex Female	Color or Race White	Birthplace Ferg Co.			
Married, Single or Widowed Widowed	Occupation				
Name of Wife or Husband					
Father's Name Elbert Heeter.	Father's Birthplace Ferg Co.				
Mother's Maiden Name E C. Heeter	Mother's Birthplace Mont Co				
Name of person giving information ER. Perry	How related to deceased Nephew.				
CAUSES OF DEATH					

PHYSICIAN
OR CORONER

Primary	Aboplexy	but	How long	X
Immediate			How long	X
Are the name, age, sex, color, date and place correctly given above?	Signature of Physician R. P. Hall M.D.			
Yrs	Address Polomac Md.			
Accident or Suicide?	X			



Name
in
Full

Hattie Brown

CERTIFICATE OF DEATH

TO BE ANSWERED BY
NEAREST FRIEND

Died at

Worley

Town

County

MARYLAND

Date
of death 190

Month

Day

Years

Months

Days

2 Dec 10

Age

18

Sex

Color or
Race

Occupation

Birth-
place

Married, Single
or Widowed

white

Name of Wife or
Husband

Single Lady

Father's
Name

Sarah Brown

Father's
Birthplace

Mother's
Maiden Name

Addie Cavy

Mother's
Birthplace

Name of person giving
Information

How related
to deceased

PHYSICIAN
OR CORONER

CAUSES OF DEATH

Primary

Typho. Pneumonia
Heart Failure

How long

9 days

Immediate

How long

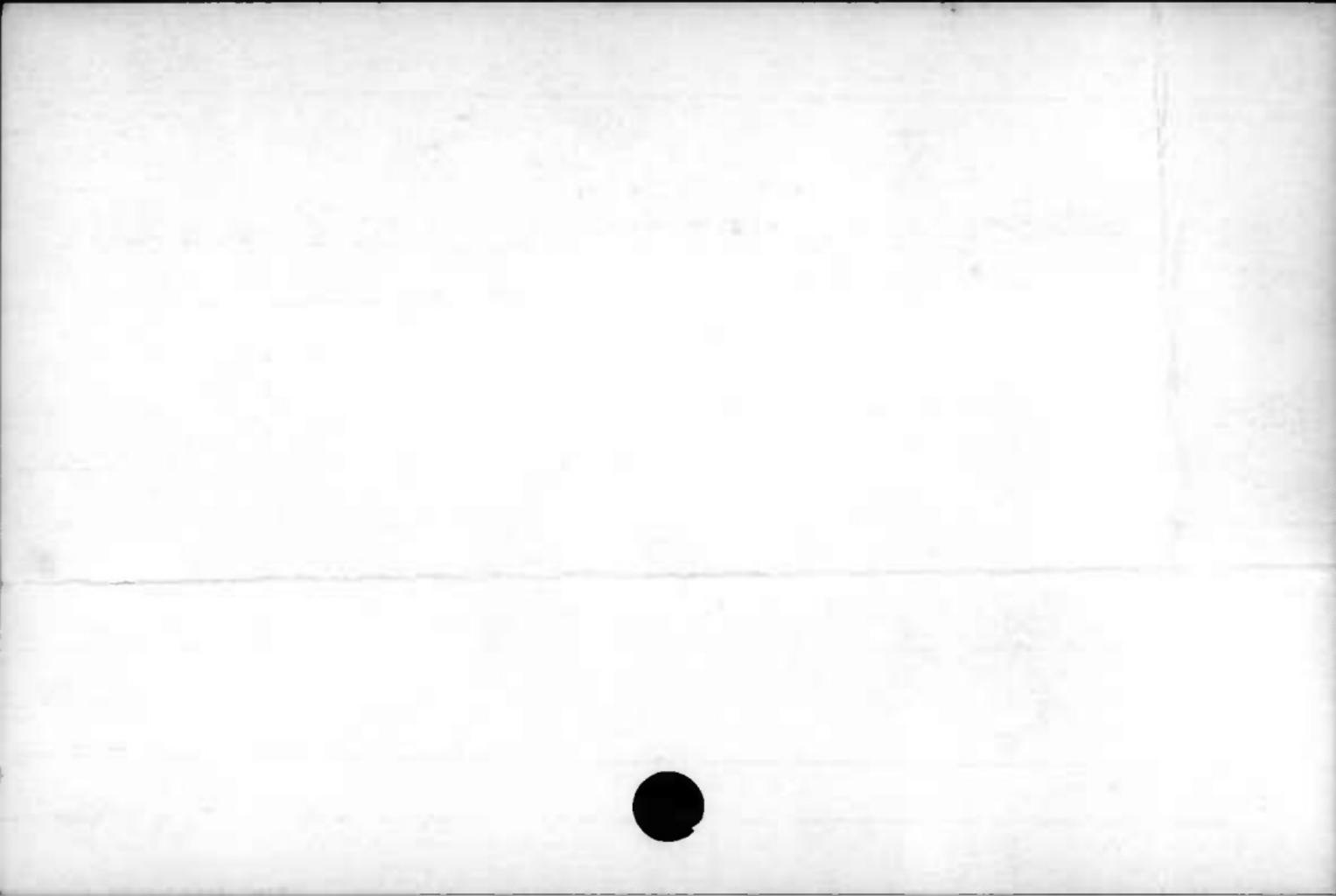
Are the name, age, sex, color, date
and place correctly given above?

Signature of
Physician

Address

H. G. Spurrier
Worley Md

Accident or Suicide?



William Brown of James

Town

County

Died at

Brighton

Montgomery

MARYLAND

Date 1902	Month Dec	Day 18	Y. 1	M. 2	D. 27	Native of Brighton	Occupation Farmer
Male	White		Age 82	2	27	Widow	Divorced
Female	Colored		Married	Single		Widower	Number of children living 6

Husband of

Elizabeth Brown (deceased)

Wife

Father's Name

James Brown

Mother's

Name

Ann Brown,

Cause of Death

Primary Weak Heart

How long sick

3 days.

Death

Immediate

Pneumonia

Accident, Suicide, Homicide

Reported by

Aug Stabler

Address

Brighton

Montg. Co., Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Name
in
Full

Richard Caywood.

CERTIFICATE OF DEATH

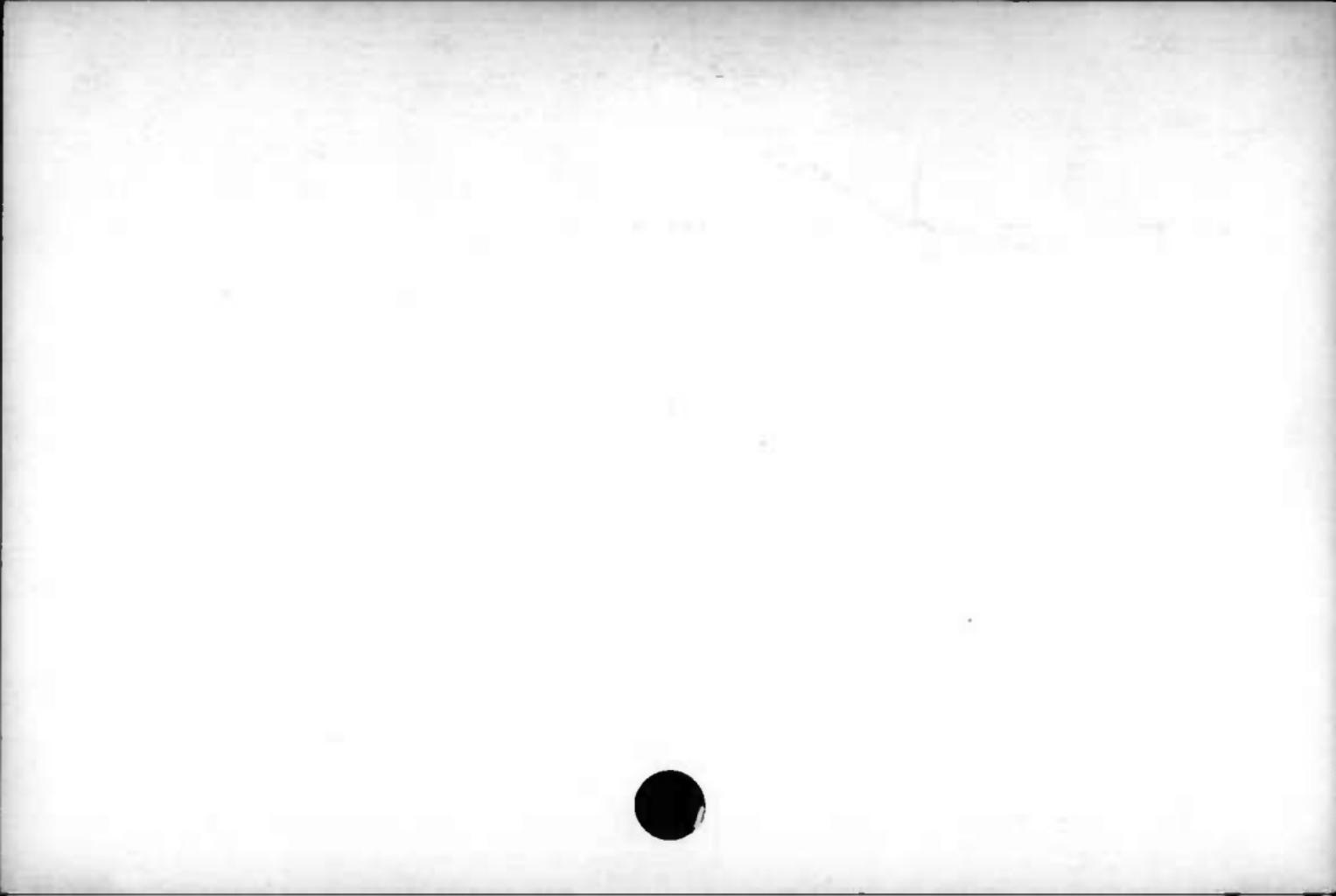
TO BE ANSWERED BY
NEAREST FRIEND

Died at	Towson		County	MARYLAND	
Date of death 1902	Month Dec	Day 30	Age 87	Months	Days
Sex Male	Color or Race White		Occupation	Birth-place Virginia	
Married, Single or Widowed Widowed			None.		
Name of Wife or Husband	X				
Father's Name	X			Father's Birthplace	X
Mother's Maiden Name	X			Mother's Birthplace	X
Name of person giving Information	Jos E. Slack			How related to deceased	None.

CAUSES OF DEATH

PHYSICIAN
OR CORONER

Primary	General debility	154	How long	4 months
Immediate	Exhaustion		How long	
Are the name, age, sex, color, date and place correctly given above?		Signature of Physician Address		
Yes		W. J. P. May, M.D. Pohoman, Md.		
Accident or Suicide?				



Fields

Town

County

Died at

Wauhawing

Montgomery

MARYLAND

Month

Day

Y.

M.

D.

Native of

Md

Occupation

None

Date 19

02

Dec. 10

Age

3

Male

White

Married

Widow

Divorced

Female

Colored

Single

Widower

Number of children living

Husband of

Wife

Father's

Name

Clayton Fields

Mother's

Maiden Name

Fanny Lovel

How long sick

Cause of

Primary

Tubercular Meningitis on neck

Death

Immediate

28

Accident, Suicide, Homicide

Reported by

R. H. Walling M.D.

Dobleville, Md.

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Leonard Hebron

Town

County

Died at Polesville Maryland

MARYLAND

Month

Day

Y.

M.

D.

Date 1902

Dec 17

Age

78

Native of

Md.

Occupation

Servant

Male

White

Married

Widow

Divorced

Female

Colored

Single

Widower

Number of children living

8

Husband of

Emily Bruce

Wife

Mother's

Father's

Rosina Bruce

Name

W.W. Hebron

Maiden Name

How long sick

Cause of

Primary

Immediate

Old Age 154

Accident, Suicide, Homicide

Reported by

J. S. Pole

Address

Polesville Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Helen H. Hoeff

Town

County

Died at

Sandy Spring Maryland

MARYLAND

Date	Month	Day	Y.	M.	D.	Native of	Occupation
1902	12	24	Age 43	4	10	Maryland	Housewife
	Male	White		Married		Widow	Divorced
	Female	Colored		Single		Widower	Number of children living

Husband of Henry H. Hoeff

Wife of Nichols Berry

Mother's Name
Rosanna Berry

Father's Name
Nichols Berry

How long sick

3 weeks

Cause of Death Primary Paralysis

Death Immediate Coma

Accident, Suicide, Homicide

Reported by Roger Barker

Address Sandy Spring

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Name
in
Full

TO BE ANSWERED BY
NEAREST FRIEND

PHYSICIAN
OR CORONER

Jessie Elizabeth Jackson

CERTIFICATE OF DEATH

Died at		Town	County		MARYLAND	
Date of death	1902	Month Dec	Day 23	Years —	Months 10	Days 4
Sex	Female	Color or Race	Negro	Occupation	Birth-place	Spencerville
Married, Single or Widowed						
Name of Wife or Husband						
Father's Name	Henry Jackson			Father's Birthplace	Md	
Mother's Maiden Name	Salaria Johnson			Mother's Birthplace	Md	
Name of person giving Information	Sandra Johnson			How related to deceased	Mother	

CAUSES OF DEATH

Primary

Tuberculosis

27

How long

6 months

How long

Immediate

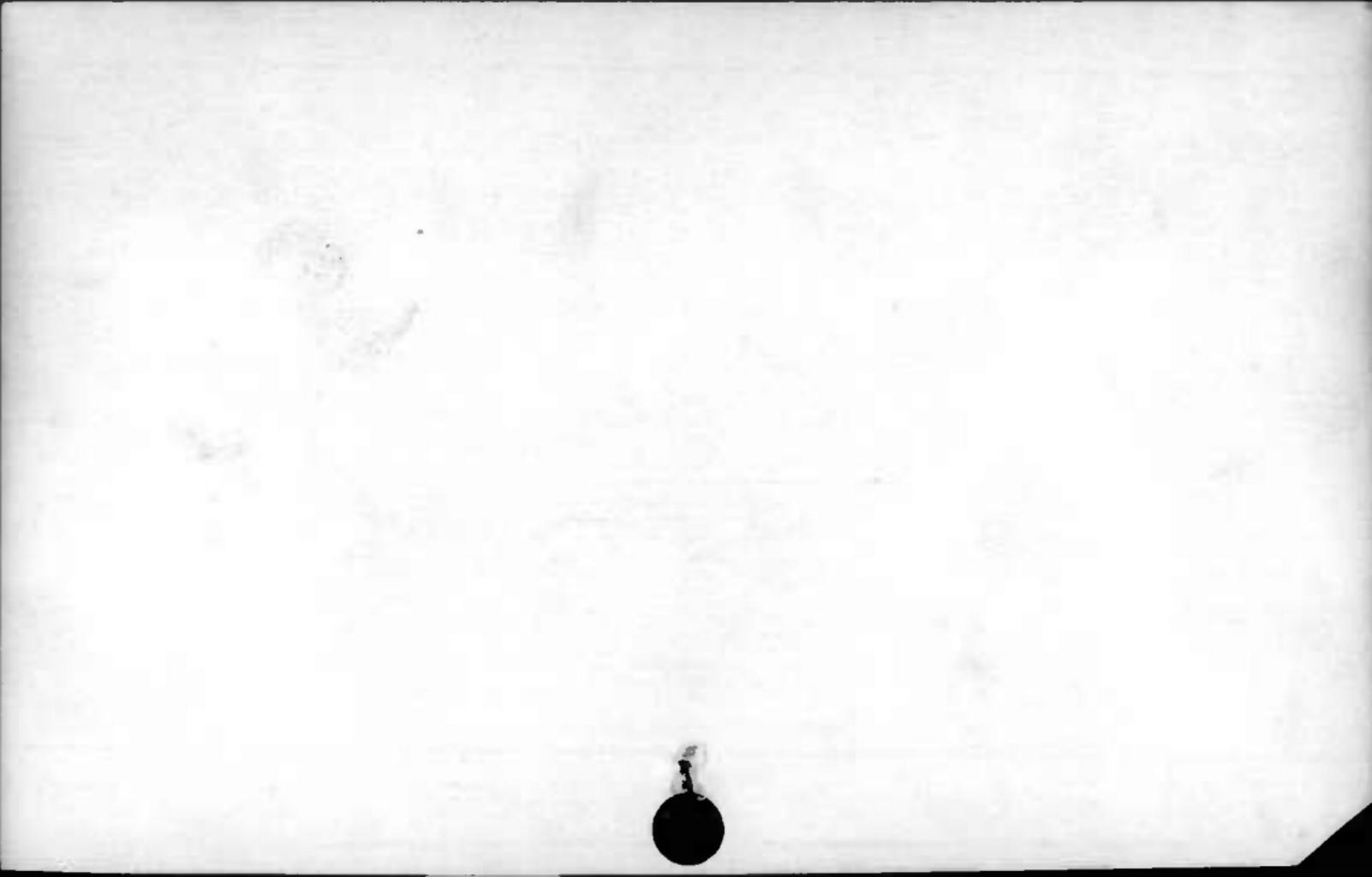
Exhaustion

Are the name, age, sex, color, date and place correctly given above?

Signature of Physician

Address

J. R. Batson
Spencerville



Ethel Jones.

Town

County

Died at

Poolesville

Montgomery

MARYLAND

Month

Day

M.

D.

Native of

Occupation

Date 1902

Mo.

Year

Age 11

- -

Md.

Female

Colored

Single

Widow

Widower

Divorced

Number of children living

Husband of —

Wife

Father's

Name

Dennis Jones.

Mother's

Maiden Name

Mollie Peters

How long sick

4 wks.

Cause of

Primary

Acute pulmonary tuberculosis

How long sick

Death

Immediate

Asthma

Accident, Suicide, Homicide

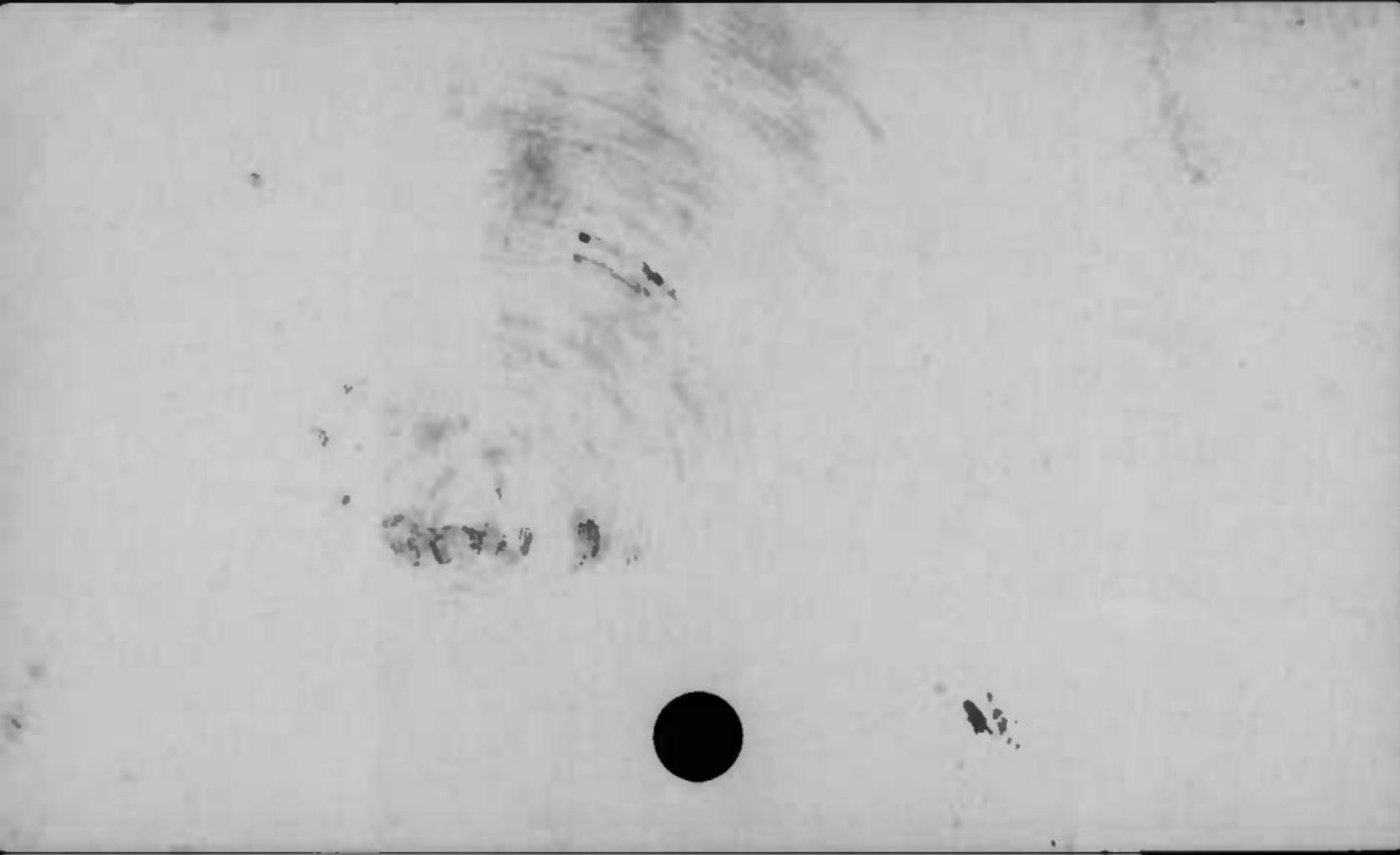
Reported by

J. L. D. Bourne M.D.

Address

Poolesville Montgomery Co. Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Name In Full

Certificate of Death

George Lyles

Town

Died at Posterville

County

MARYLAND

Month Day

Y. M.

D.

Native of

Occupation

Date 192 Dec 17

Age 68

Male

White

Married

Widow

Female

Colored

Single

Widower

Divorced

Number of children living

4

Husband of

Wife

Father's

Name Harry Lyles

Mother's

Maiden Name Caroline

How long sick

Cause of

Primary

Death

Immediate

Reported by

Address

154

Accident, Suicide, Homicide

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Name in Full

Certificate of Death

John G. F. Mangum

Town

County

Died at

MARYLAND

Takoma Park Montgomery

Month

Day

Y.

M.

D.

Native of

Occupation

Date 19

02

Dec. 30

Age 75 8

1

1

1

Male

White

Married

Widow

Female

Colored

Single

Widower

Divorced

Number of children living

Husband
of

Wife

Father's

Mother's

Name

Maiden Name

Cause of

Primary

How long sick

Death

Immediate

10 days

Accident, Suicide, Homicide

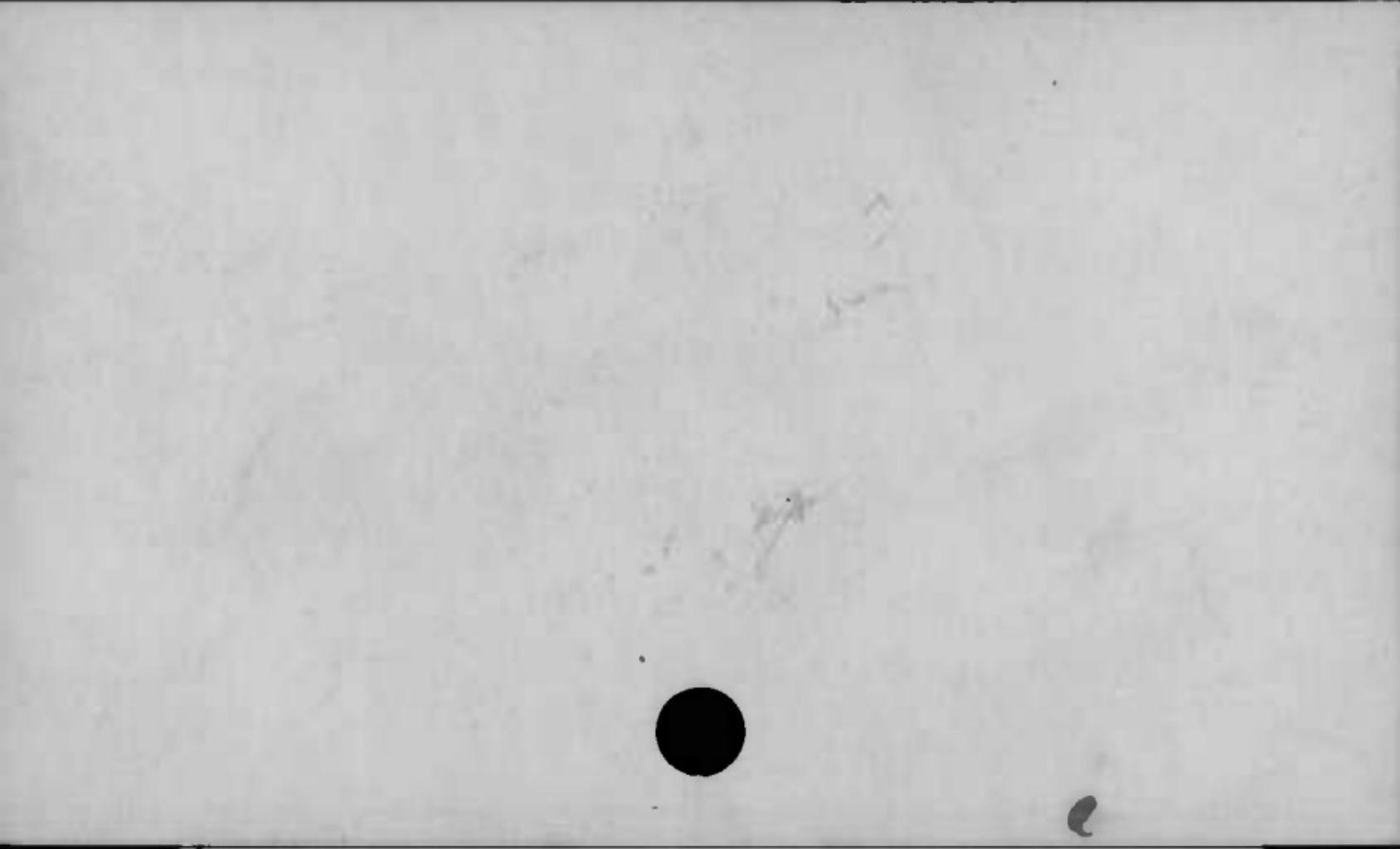
Reported by

Alfred T. Parsons M.D.

Address

Takoma Park, Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Name
in
Full

M. B. Steward

CERTIFICATE OF DEATH

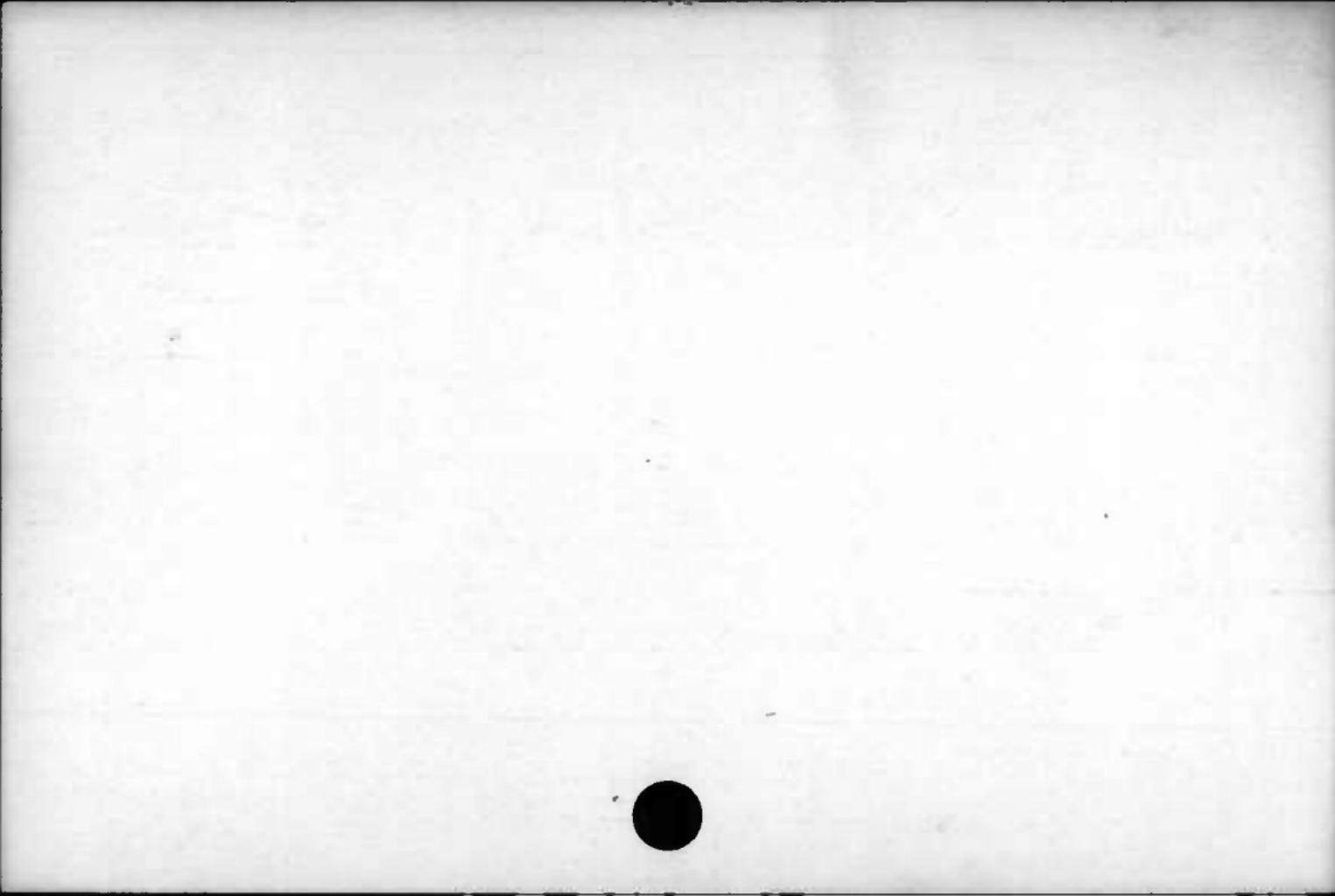
TO BE ANSWERED BY
NEAREST FRIEND

Died at	Town <i>Potomac</i>	County <i>Maryland</i>	MARYLAND		
Date of death 1908	Month Dec	Day 28	Age 28	Years	Months X Days X
Sex Male	Color or Race White	Occupation Painter.	Birthplace Ta'		
Married, Single or Widowed	Married				
Name of Wife or Husband	Ella Steward				
Father's Name	X		Father's Birthplace	X	
Mother's Maiden Name	X		Mother's Birthplace	X	
Name of person giving information	Lucy T. Steward		How related to deceased	Sister	

CAUSES OF DEATH

PHYSICIAN
OR CORONER

Primary	<i>meningitis</i>	93	How long 14 days
Immediate	<i>diphoid fever.</i>		How long 17 "
Are the name, age, sex, color, date and place correctly given above?	Yes -	Signature of Physician <i>K. J. Pratt, M.D.</i>	Address <i>Potomac Md.</i>
Accident or Suicide?			



Name
in
Full

Sarah Taylor

CERTIFICATE OF DEATH

To BE ANSWERED BY
NEAREST FRIEND

Died at	Town	County	MARYLAND		
Date of death 1902	Month Dec	Day 5	Year 30	Months 2	Days 28
Sex Female	Color or Race Colored	Birth-place Md.			
Married, Single or Widowed Married	Occupation Housewife				
Name of Wife or Husband					
Father's Name John Berry	Father's Birthplace Md.				
Mother's Maiden Name Sarah Mallory	Mother's Birthplace Va.				
Name of person giving information John Berry	How related to deceased Father				

CAUSES OF DEATH

PHYSICIAN
OR CORONER

Primary

Sa. Lockke

10

How long

About 1 wk

Immediate

congestion of Brain

How long

Are the name, age, sex, color, date and place correctly given above?

Yes

Signature of Physician

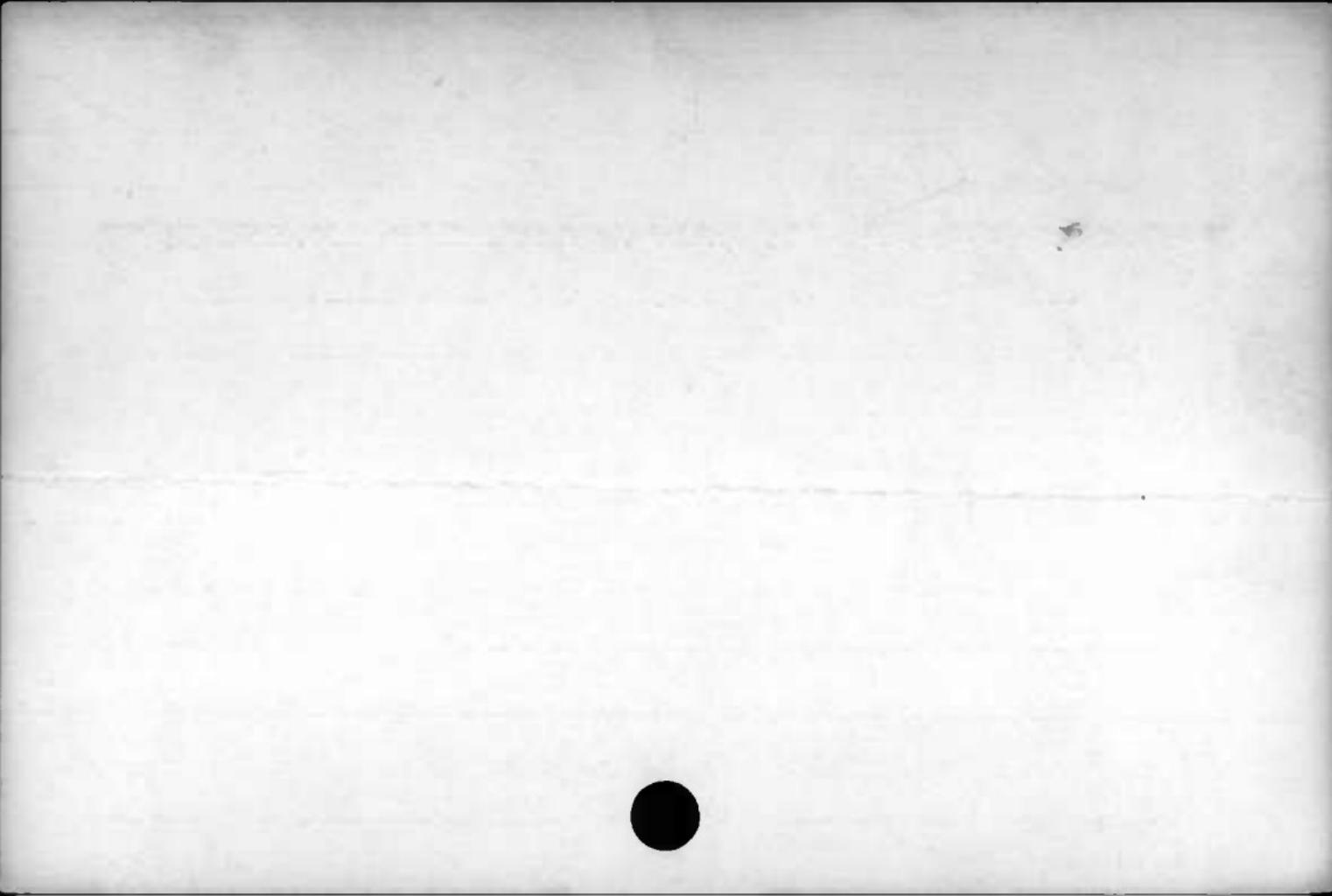
Address

H. J. Brown

Burnt Mills

Md.

Accident or Suicide?



Zebdeu Wheatley

Town

County

Died at

Sandy Spring

MARYLAND

Date 1902

Month 12 Day 3

Age 67 Y. M. 6-

D.

Native of

Occupation

Male

Wife

Married

Widow

Divorced

Female

Colored

Single

Widower

Number of children living

Husband

of

Julia Wheatley

Father's

Name

Mother's

Name

Cause of

Primary

Heart Disease

How long sick

5 days

Death

Immediate

Heart exhaustion

Accident, Suicide, Homicide

Reported by

Roger Burk

Address

Sandy Spring 111d

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Zachariah W. White

Town

County

Died near Olney

Maryland

MARYLAND

Date	Month	Day	Y.	M.	D.	Native of	Occupation
1902	Dec.	25	Age	67	-	-	Montgomery Co., Md., Farmer
Male	White		Married			Widow	Divorced
Female	Colored		Single			Widower	Number of children living

Husband
of _____

Wife _____

Father's
Name

Samuel White

Mother's
Name

Rosa White.

Cause of
Primary

Congestion of Brain

How long sick
About one day.

Death
Immediate

Abscissory

Accident, Suicide, Homicide

Reported by

Chas. Farquhar, M. D.

Address

Olney, Montg. Co., Md.



